| •               |          | CLAIMS       | ONLY         |  | Application Number 10/606 Hb3 Filing Date  |
|-----------------|----------|--------------|--------------|--|--|
| ، المركبية      | <u> </u> |              |              |  | Applicant(s)   |
|                 | CLAIMS   | ASFILED      | AFTER FIRST  |  | May be used for addition   |
|                 |          | Indep Depend | AMENOMENT    | AFTER SECOND AMENDMENT                           | May be used for additional claims or amendments  |
|                 | 1 2      | / Sepend     | Indep Depend | Indep Depend                                     | - 100eo ( Dan 1  |
|                 | 3        |              |              |  | 51 September 1 September 1 September 1 September 2 Sep |
| 1               | 5        | 1-           |              |  | 53   |
| F               | 6 7      | 1=1          |              |  | 54 55  |
| į.              | 8        |              |              |  | 56<br>57   |
| L               | 9        |              |              |  | 58   |
| - 1             | 11       |              |              |  | 59<br>60   |
| F               | 13       |              |              |  | 61 62  |
| .               | 15       |              |              |  | 63<br>64   |
| E               | 16<br>17 |              |              |  | 65<br>66   |
|                 | 18       |              |              |  | 67   |
| F               | 20       |              |              |  | 68   |
| ·               | 22       |              |              |  | 70 71  |
|                 | 23       |              |              |  | 72 73  |
|                 | 25       |              |              |  | 74   |
| -               | 27       |              |              |  | 75<br>76   |
| 1               | 29       |              |              |  | 77   |
|                 | 1        |              |              |  | 73   |
| 3               |          |              |              |  | 61   |
| 3               | 5        |              |              | +  | 63   |
| 3:              |          |              |              |  | 84<br>85   |
| 36              |          |              |              |  | 66<br>67   |
| 40              |          |              |              | <del></del>                                      | 86<br>69   |
| 41              |          |              |              | <del>                                     </del> | 90   |
| 43              |          |              |              |  | 92   |
| 45<br>46        |          |              | 1            |  | 93   |
| 47              |          | <del></del>  |              |  | 95<br>96   |
|                 |          | +            |              | F-   | 97<br>95   |
| Total           | 1        |              |              |  | 99   |
| Indep           | 14_      |              |              | To   | 100<br>Dial  |
| Depend          | 1/8      |              |              | Inc.<br>Tol                                      | dep  |
| Total<br>Claims | 122      |              |              | De   | spend .  |
| •               |          | L            |              | Tot<br>Cla                                       | lal<br>nims  |
|                 |          |              |              |  |  |